

# EXHIBIT E



UNUSUAL OCCURRENCE REPORT  
PD 970-161 (Rev. 9-88)-CS82

DETECTIVE BUREAU

Page 1 of 1  
Supplemental: Yes ☐ No ☒

DET. BOD.	DATE/DAY OF ORIGINAL REPORT	TIME	PLACE OF OCCURRENCE AND TYPE OF PREMISE	CRIME/CONDITION
BOMB SQ	06/25/06 Sunday	2240	F/O 1128 Third Ave Street	Hoax Device Investigation No Explosives Present
APPARENT MOTIVE				
<p>DETAILS: (COMPLETE AND CONCISE. INCLUDE DESCRIPTION AND VALUE OF ANY PROPERTY TAKEN)</p> <p>At T/P/O the services of the Bomb Squad were requested by Sgt. McGuinness of Emergency Services Unit Truck 1 in regards to a suspicious package at the above location. Members of the Bomb Squad were informed that a black cloth fanny pack contained unknown items which included 2 metal cylinders with wires attached. Utilizing Bomb Squad procedures the package was deemed to contain nothing of an explosive nature but was constructed in such a manner as to cause public alarm and is therefore deemed to be a "Hoax Device." Examination of the package revealed an 18 volt battery wired into two sealed capacitors with a wiring harness, approximately 18 inches in length, protruding from the package. The wiring harness led to a micro switch which was taped onto the end of the wires.</p> <p>The package was originally located inside the above location, a Starbucks Coffee Shop, but was placed outside by employees when they opened the package and saw what they believed was a bomb.</p> <p>A crime scene was established and the scene was processed by members of the Crime Scene Unit under Run#06/677</p> <p>This case will be further investigated by the 19<sup>th</sup> Precinct Detective Squad under case #1273, Det. Goetz assigned.</p> <p>CHIEF OF DETECTIVES UOL# 0626-11</p>				
COMPLAINANT(S) (SEX CRIME VICTIMS ARE NOT TO BE NAMED)				
LAST NAME PSNY		FIRST NAME	MI	ADDRESS
CITY/STATE		APT. #	ADDRESS	
SEX	RACE/ETHNICITY	AGE	D.O.B.	TYPE OF INJURY
HOSPITAL		CONDITION/PROGNOSIS		
HYPER #		ACTIONS PRIOR TO INCIDENT		
NUMBER OF PERPS:				
PERPETRATOR(S)				
LAST NAME		ARRESTED: YES <input type="checkbox"/> NO <input type="checkbox"/>	FIRST NAME	MI
ADDRESS		CITY/STATE	APT. #	ADDRESS
SEX	RACE/ETHNICITY	AGE	HEIGHT	WEIGHT
D.O.B.				
DESCRIPTION OF CLOTHING				
HYPER #		WICKNAME	ON PAROLE	WARRANT
YES <input type="checkbox"/> NO <input type="checkbox"/>		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
BRIEF CRIMINAL HISTORY				
INJURIES				
VEHICLE USED		MAKE	MODEL	COLOR
YES <input type="checkbox"/> NO <input type="checkbox"/>		PLATE	ARRESTING OFFICER	
COMMAND				
INITIAL INVESTIGATIVE STEPS TAKEN: (CANYASS, INTERVIEWS, COMPUTER CHECKS, ALARMS, PHOTOS, ETC.)				
Response to scene and examination of package				
Conferral with Emergency Service Unit				
Conferral with 19 <sup>th</sup> PDS, JTTF, Intelligence Division and Crime Scene Unit				
NOTIFICATIONS:				
NAME PRESENT (Y OR N)				
CHIEF OF DETECTIVES: Det. Patterson N				
DET. BOROUGHS: Det. Goetz, 19 <sup>th</sup> PDS Y				
DET. DUTY CAPTAIN:				
SQUAD SUPERVISOR: Lt Torre, C.O. Bomb Squad N				
COVERING SUPERVISOR: Sgt Hourihan Y				
HOMICIDE SQUAD:				
CRIME SCENE: Det Entenmann RUN # 06/677 Y				
ADA:				
NAME PRESENT (Y OR N)				
MAJOR CASE:				
BIAS:				
INTELL: Det Seibold/Det. Herbinson Y				
TRANSPORT:				
HOUSING:				
SID: Det. Thomas, JTTF N				
AER: N				
DCP:				
OTHER: Chief Pulaski N				
COMPLAINT #	PCT.	CASE #	DET. ASSIGNED: LAST NAME, FIRST	SHIELD
6035	19	BS#800	Trancho, Joseph J	11428
DATE OF THIS REPORT		SUPERVISOR SIGNATURE		COMMAND
06/26/06		<i>[Signature]</i>		BOMB SQ
				COMMAND
				Bomb S

ANY ADDITIONAL NAMES OR INFORMATION SHALL BE REPORTED ON AN ADDITIONAL SHEET